ATR-I: Recovery Support Services
Provider Standards Fact Sheets
02. Family, Marital and Life Skills Education

Family, Marital and Life Skills Education providers, a sub-set of ATR-I Recovery Support Services, help individuals and/or groups to enhance personal and family skills for work and home, reduce marriage/family conflict, and develop attitudes and capabilities that support the adoption of healthy, recovery-oriented behaviors and healthy re-engagement with the community. Family/Marriage and Life Skills Education (hereinafter referred to as "education") may include activities that are culturally, spiritually or gender specific.

Education Services Described

Education in recovering individuals shall consist of the following objectives:

- promotion of structured leisure and recreational activities
- restoration and celebration of traditional family events and rituals
- parenting education, support and promotion of parent-child activities
- job preparedness and educational preparedness training; supported employment
- peer support
- development of self help skills such as building self-esteem; learning to identify and express feelings; building positive relationships with family, peers and others; developing decision-making skills; understanding chemical dependency as a family illness; understanding codependency and dysfunctional behaviors and life patterns associated with being a member of a family in which there is a substance abuse problem; learning and practicing non-violent ways to resolve conflict; health care skills including understanding mental illness and how to manage it; warning signs of relapse and how to prevent it
- individualized assistance and training in activities of daily living and home economics based on client assessment
- instruction and participation in culture-specific activities that reunite the recovering individual with one's traditions, "lifeways", heritage, symbols, history and language where appropriate

The goal of education is that through advocacy, teaching, role modeling, educational and social activities, community service and groups, clients and consumers in recovery will find and adopt the various tools they'll need to become productive members of society. Some of those tools may be found in the following:

JOB DEVELOPMENT & JOB SEARCH: assist clients in acquiring the necessary skills to obtain and maintain employment. Clients are taught interviewing techniques, verbal and nonverbal communication skills, how to write resumes, dressing for success, how to complete job applications, and methods for coping with conflict and stress in employment situations. Clients additionally are instructed in how to conduct both newspaper and computer job searches and then are transported to various job sites to submit applications or interview for available positions.

EDUCATIONAL SERVICES: Utilizing the services of volunteers, interns and local resources, individual and group educational instruction is offered with goals varying based on the needs of the clients from basic literacy to G.E.D. preparation. The focus of services is on providing practical reading as well as language and math skills that will assist the client in his/her functions and work or school environment.

LIFE SKILLS: Groups are facilitated using Best and Promising Practices such as the Cognitive-Behavioral Education Model whose components include problem solving, decision-making and goal setting. Groups are gender specific in some instances and all-inclusive in others, and include, among others, Anger Management groups that assist clients in learning positive coping skills in order to manage anger in a constructive manner. Trauma Education groups that help clients identify ‘triggers’, manage intense or difficult past or present emotions and teach them new ways to handle traumatic life events. Health Education groups that address HIV, communicable diseases, and related health issues. Recreation activities that teach clients how to positively incorporate leisure time and recreation, both active and passive, into a balanced and healthy lifestyle.

Standards

In order to ensure the safety of Idaho's consumers and to foster the development of an effective substance abuse treatment & recovery system, the following minimum standards have been established. All programs funded by Access to Recovery Idaho (ATR-I) are required to meet these minimum standards.

Criminal History Check
All individuals providing education services to youth under age 18 must have a current criminal history check. Checks must be conducted by the Idaho Department of Health and Welfare unless the individual works for the Department of Education or a law enforcement agency. Documentation that the criminal history check has occurred must be maintained in each staff person's file.

Liability Insurance
All programs will have liability insurance at a level appropriate for the level of risk involved.

Workman's Compensation
All agencies, organizations, coalitions or other groups receiving ATR-I funding, who employ staff, must have workman's compensation coverage for all employees.

Records Management
All programs, receiving ATR-I funding, must have established procedures for maintenance of records which include participant information. These procedures must establish standard file contents and methods to ensure records containing confidential client information are secured and available only to authorized staff.

Best/Promising Programs
All agencies, organizations, coalitions or other groups receiving ATR-I funding will use programs recognized as Best or Promising Practice Education Programs by the Center for Substance Abuse Prevention or Treatment or Centers for the Application of Prevention Technology, the U.S. Department of Education or the Office of Juvenile Justice and Delinquency Prevention. Education programs that are not yet using Best or Promising Practices will demonstrate how they will adopt such programs and practices and describe the strategies they will use to adopt them. Programs that are accepted by BPA on the basis of their commitment to adopt a Best or Promising Practice will be deemed Developing Programs.

Community Coalitions
Community coalitions should apply for funds for activities that affect the shared environment of their community. These are activities that seek to raise community awareness or change community attitudes towards substance abuse with the goal of improving the quality of life of the community members. The coalition will also be required to conduct annual Coalition Process Outcome Assessment.

Program Administrative Records
All substance abuse education programs, which are funded wholly or in part with ATR-I monies, must maintain a program file, which includes the following:

a. the name of the program
b. copy of agreement (contract) and requirements
c. a brief program description including:
1. information about the development of the program and relevant research indicating if recognition as best/promising practice or is a developing program
2. target population
3. identified need
4. education strategy(ies) being implemented
5. overview of the content of the program
6. list of activities to be provided
7. number of sessions/activities to be provided and anticipated length of each session
8. the setting or facility to be used to provided the program
d. list of staff providing services including minimum qualifications
e. statement of ethics which all staff adhere to
f. staff development plan for employees/volunteers providing services
g. identifies skills to be obtained or enhanced
h. the standard for staff to participant ratio
i. copies of liability insurance policy and workman's comp policy as stated above
j. anticipated program outcomes
k. methods for collecting outcome data
l. summary of outcome findings to date
m. in the case of developing programs, only a paragraph indicating the status of the program in evaluation and plans for achieving recognition as best practice
n. in the case of coalitions meeting minutes must be included

Family, Marital and Life Skills Education Standards – as they relate to the prospective or interested provider – are defined as follows:

Core Capabilities
<u>Education Programs will be expected to provide the following services and perform the following tasks:</u>

a) A physical location, mailing address, contact person, telephone and fax machine (or internet access sufficient to communicate vouchers and invoices).
b) Sufficient equipment and supplies to provide education to individuals and groups.
c) Financial stability that does not rely solely upon ATR-I funds for the sustainability of the program.
d) A record of performance in the provision of education of at least one (1) year.
e) A catalogue of education materials, course work, curricula, manuals and other evidence of best or promising practices related to education of people in recovery.
f) Become knowledgeable of and conversant with local/statewide providers of related services, and treatment services.
g) Work closely with clients who represent various populations, cultures, disorders and other unique circumstances in manner that is non-discriminatory.
h) Work closely with treatment providers who may represent a wide variety of treatment philosophies and a wide variety of clinical needs ranging from criminal justice offenders to addicted individuals suffering from co-occurring severe mental illnesses.
i) Actively communicate and collaborate with treatment providers and referral sources such as probation and parole officers for the purpose of meeting client needs and maintaining active relationships and open networks or “linkages” between services and agencies.
j) Actively document client progress through their education in a manner acceptable to this program.
k) Manage facilities and practices that maintain client confidentiality and meet safety standards

l) Maintain continuity of education while detecting and responding to any unmet, particularly urgent and/or emergent clinical needs. Such needs will be brought to the attention of the case manager and/or treatment provider as soon as possible.
m) Ability to make appropriate referrals (job training, etc.) in the community and track clients including those who have discharged for reasons of non-compliance.
n) Invoice or remit claims to the management services contractor in a timely fashion according to approved Billing Procedures.
o) Receive authorized Vouchers for services prior to supplying services.

Requirements for State Approval to Deliver Recovery Support Services

Service Administration

This section describes the administrative and organizational requirements that providers must have in place in order to deliver recovery support services under the ATR program.

1. Maintain a policy and procedure manual that contains, at a minimum, the organization's purpose and philosophy. Faith-based providers shall also include Articles of Faith and Entity Creed.

2. A governing body (e.g., a board of directors that meets according to their bylaws to provide fiscal planning and oversight, ensure quality improvement in service delivery, establish policies to guide administrative operations of the organization, ensure responsiveness to the community and individuals being served, and delegate operational management to a program manager in order to effectively operate its services.

3. Maintain documentation to demonstrate full compliance with the ATR credentialing requirements.

4. Credentialed key staff or volunteers shall provide supervision of the recovery support services for which the organizations is approved to deliver.

5. A plan of action for continuity of services in the event the organization can no longer perform services due to facility incapacitation or loss of key personnel.

6. A written policy to prevent conflict of interest which states that no employee or volunteer may use his or her ATR provider designation to secure privileges or advantages of any client.

7. The organization shall maintain a work and/or service environment that is free from sexual harassment and intimidation.

8. The organization shall not subcontract services it is approved to provide under the ATR program unless a previous agreement has been arranged with MSC.

9. The organization must provide proof of professional liability and property insurance.

10. Organizations that provide transportation for clients must provide proof of proper auto insurance and current driver's license of driver. Organizations that provide childcare for clients must provide proof of current daycare license or proof that childcare is being provided while parent is on-site.

Qualifications of Personnel

1. The organization shall insure that staff possesses the training, experience, and credentials to effectively perform their assigned services and duties related to the ATR program.

2. All personnel and volunteers conducting GPRA interviews will be required to participate in training on how to use the ATR GPRA tool.

3. The organization shall provide documentation that the ATR program is included in the orientation of new staff and/or volunteers.

4. The organization shall conduct at least three (3) hours of annual refresher training for ATR staff and volunteers about the policies, procedures and services of the agency.

5. The organization shall require any individual delivering services to children/minors, developmentally disabled or elderly receive and successfully pass a Criminal History background check *prior to* the delivery of services.

6. The organization shall maintain complete, confidential, and current personnel records for each staff or volunteer delivering services under the ATR program.

7. The organization shall establish and maintain a written standard of conduct for all staff and/or volunteers.

8. The organization shall not permit an employee or volunteer to enter into a business relationship with a client or family of a client receiving ATR services or employ them while the client is receiving ATR services.

9. The organization's employees and/or volunteers shall not engage in any conduct which is criminal in nature or has the appearance of misconduct.

10. The organization shall ensure that each employee is legally eligible to work and reside in the United States.

Fiscal Accountability

1. The organization shall operate according to an annual written budget of anticipated revenues and expenditures that is approved in a timely manner by the governing body. Fiscal reports should be prepared at least annually and shared with the governing body and show a comparison of the budget to actual expenditures.

2. The organization shall have fiscal management policies, procedures, and practices consistent with generally accepted accounting principles and, as applicable, state and federal law, regulation, or funding requirements.

3. The organization shall utilize financial activity measures to monitor and ensure its ability to pay current liabilities and to maintain adequate cash flow.

4. Fiscal records shall be retained for at least five years or until any litigation or adverse audit findings, or both, are resolved.

Documentation

1. The organization has an organized record system for each client that receives recovery support services.

2. Client records shall be maintained in a manner which ensures confidentiality and security. The organization shall abide by all local, state, and federal laws and regulations concerning the confidentiality of records.

3. If records are maintained on computer systems, there must be a backup system to safeguard records in the event of operator or equipment failure and to ensure security from inadvertent or unauthorized access.

4. The organization shall retain individual records for at least two (2) years or until all litigation, adverse audit findings, or both, are resolved.

5. The organization shall assure ready access to the records by authorized staff and other authorized parties including the Management Services Contractor and the Department of Health and Welfare.

6. All entries in the individual record shall be legible, clear, complete, accurate, and recorded in a timely fashion. Any errors shall be marked through with a single line, initialed and dated. Documentation shall be made with indelible ink or print.

7. All recovery support services shall, at a minimum, include the following documentation:
   - Name and client number of individual receiving the service
   - Title of the service provided;
   - Brief description of the service provided;
   - The date and actual time (beginning and ending times) the service was rendered;
   - Name and title of the person who rendered the service.

Data Collection and Reporting

1. All organizations that participate in the ATR program must comply with reporting requirements of the grant and have in place the computer technology to access the Provider Connect web-based reporting system.

Rights, Responsibilities, and Grievances

1. The organization shall demonstrate through its policies, procedures, and practices an ongoing commitment to the rights, dignity, and respect of the individuals it serves.

2. Each client shall be informed and oriented as to what will happen as recovery support services are provided. Information shall include applicable program rules, participation requirements or other expectations.

3. The organization shall have in place an internal procedure for handling client complaints and grievances in an expedient manner.

Report of Complaints of Abuse, Neglect, and Misuse of Funds/Property

1. Any employee or volunteer who has reasonable cause to believe that a client has been subjected to physical abuse, sexual abuse, misuse of funds/property, class I neglect, class II neglect, or verbal abuse while under the care of a recovery support program shall immediately make a verbal or written complaint to the organization's Administrator.

2. The organization shall immediately report any complaints of abuse, neglect, and misuse of funds or property in a recovery support program that is credentialed by the Idaho Substance Abuse Authority and funded by the ATR program. Complaints should be reported to the appropriate Bureau of Substance Abuse Program Manager within one business day of the alleged incident.

3. The organization shall follow State regulations for reporting incidents of child abuse and/or neglect.

4. Failure to report shall be cause for disciplinary action, criminal prosecution, or both.

Client Confidentiality/HIPAA

1. All organizations that provide ATR recovery support services to clients shall follow the federal confidentiality regulations (42 CFR Part 2) related to the release of alcohol and drug abuse records.

2. All organizations that have been determined to be a covered entity as defined by HIPAA shall adhere to the policies and procedures that the HIPAA privacy rule requires for each covered entity.

Applicable Education Standards

1. If any regulatory body regulates your facility or program please name the agency/body and include any performance measures you may have prepared in the past.

2. Personnel providing services have a working knowledge of or experience in:
   a. Services that are appropriate for the needs of the client being served.
   b. Education that is relevant to the lives and circumstances – particularly emphasizing healthy behaviors and recovery lifestyles - of the client being served.
   c. Knowledge, experience or education equivalent to a bachelor's degree in a human service related field. Experience is defined as no less than two years of providing the related recovery support service the personnel are working within.

3. Based on the needs of the client served, education service/program coordination includes:
   a. Activities carried out in collaboration with the client served.
   b. Outreach to encourage the participation of the client served.
   c. Coordination of, or assistance with, crisis intervention and stabilization services, as appropriate to qualifications.
   d. Assistance with achieving goals for independence as defined by the client served.

e. Optimizing resources and opportunities through:
    1) Community Linkages.
    2) Enhanced social support networks.

f. Assistance with:
    1) Accessing transportation.
    2) Finding qualified Child Care support if relevant.
    3) Marriage and Family Education and Life Skills Training.
    4) Exploring employment or other meaningful activities.

g. Provision of, or linkage to, skill development services needed to enable the client to perform daily living activities, including, but not limited to:
    1) Budgeting.
    2) Meal Planning.
    3) Personal Care.
    4) Housekeeping and home maintenance.
    5) Other identified needs.

h. Evidence of linkage with necessary and appropriate:
    1) Financial services.
    2) Medical or other healthcare.
    3) Other Community services.

4. The organization or subcontractor provides education activities in locations that meet the needs of the client served.

5. The service mix of education (family, marital, life skills) is based on the needs of the client as identified in his or her individual treatment and/or case management plan.

6. With the consent of the client, personnel/staff/volunteers provide advocacy by sharing feedback regarding the services received with the agencies and organizations related to the provision of services.

Principles in Practice

Accountable: The organization holds itself answerable to the public and maintains internal controls. Strategic goals are translated into operational objectives, and volunteers, staff, and the governing body are held responsible for their performance. The organization adheres to strict ethical practice guidelines.

Active in Advocacy: The organization goes beyond its direct service role and seeks, through its governing body, staff, and clients, to influence and promote social policies and regulations within and beyond the community that support the health and safety of the community and its members.

Collaborative: Personnel and volunteers collaborate to perform concerted action across program and division lines. Organizational systems are used to achieve goals and do not hinder change or result in "silos."

Diverse: The organization's volunteers, staff, and governing body are representative of the community and persons served, and the organization values individual and cultural diversity.

Informed: The organization promotes open dialogue and invites input from staff, volunteers, clients, and the community. Information is clearly and rapidly shared throughout the organization.

Mission and Vision Driven: A clearly articulated mission provides the governing body, staff, and volunteers with a common purpose.

Outcomes and Results Oriented: Continual improvement is a permanent objective that promotes high quality decision-making and service delivery, and recognizes effective practices. The organization regularly sets goals, monitors performance, and uses evidence to identify opportunities for improvement and change.

Partnered with the Community: As an active member of the community, the organization partners with other organizations, volunteers, and clients to develop and pool resources, share information, and establish mutually-beneficial relationships.

Accessible: Individuals and families can obtain services where and when they need them.

Appropriate: Individuals and families receive services that are a good fit for their circumstances. Services are provided in the least intrusive or restrictive and most normalized setting to support individual or family self-determination and community connections.

Community-based: Practice strengthens community connections, and the community is seen as an important source of support. Natural networks of informal support and traditional healing practices are used whenever relevant and possible.

Coordinated: Program participants receive integrated and coordinated supports, resources and services, and transitions are planned across systems to provide continuity of care.

Culturally Competent: Practice reflects a respect and appreciation for cultural and ethnic diversity.

Evidence-based: Service approaches are based on the best available evidence for effective practice.

Individualized: Services respond to the unique needs of the individual or family and are adjusted to reflect changing conditions.

Outcomes-oriented: Service outcomes are measured and analyzed to continuously improve service effectiveness.

Provided by a Skilled and Supported Workforce: Personnel posses the competencies relevant to their job, and the organization provides a comprehensive training program, ongoing professional development opportunities, supervision, and manageable caseloads.

Respectful of Individual Rights: Practice reflects a profound respect for personal dignity, confidentiality, and privacy. Consumers are not discriminated against on the basis of age, gender, sexual orientation, religion, nationality, race, heritage or physical disability.

Strengths-based: Practice promotes the strengths and resources of individuals, families, and communities, and enables individuals to achieve maximum independence.

Supportive of Partnership: Individuals and families participate in all stages of service planning and delivery, and are primary decision-makers.

Education Provider Qualifications

01. **Provider Agreements.** Education providers must be employees or volunteers of an agency that has a valid provider agreement with the Management Services Contractor (State Facility Approval required in some cases).

02. **Criminal Background Check.** Any individual delivering education services to children/minors, developmentally disabled or elderly, must successfully pass a Criminal History background check *prior to* the delivery of services.

03. Qualifications. Qualifications of the education provider shall be verified through written documentation of work experience, education and classroom instruction. All agency staff delivering education services must meet at least one of the following qualifications:

I. **Idaho Student of Addiction Studies (ISAS) or Certified Alcohol and Drug Counselor (CADC) or Certified Prevention Specialist (CPS).** An ISAS, CADC or CPS must have current certification with the Idaho Board of Alcohol/Drug Counselor's Certification, Inc. (IBADCC) *and* have working knowledge of services that are appropriate for the needs of the client.

II. **Bachelor's Degree in a Human Services Field.** Individual having a B.A. or B.S. in a human services field *and* at least twelve months' experience with the target population. Individuals without twelve months of experience may gain this experience by working for twelve months under the supervision of a fully-qualified education provider.

III. **Licensed Clinical Professional Counselor (LCPC) or Licensed Professional Counselor (LPC).** A LCPC or LPC must be licensed in accordance with Title 54, Chapter 34, Idaho Code and IDAPA 24.15.01. "Rules of the Idaho Licensing Board of Professional Counselors and Marriage and Family Therapists" *and* have at least twelve months' experience with the target population. Individuals without twelve months of experience may gain this experience by working for twelve months under the supervision of a fully-qualified clinician.

IV. **Licensed Pastoral Counselor.** A pastoral counselor must be licensed in accordance with Title 54, Chapter 34, Idaho Code and IDAPA 24.15.01. "Rules of the Idaho Licensing Board of Professional Counselors and Marriage and Family Therapists" *and* have training in the "Core Competencies for Clergy and Other Pastoral Ministers in Addressing Alcohol and Drug Dependence and the Impact on Family Members."

V. **Experience Equivalency.** Experience is defined as no less than two years of providing the recovery support service the individual wishes to deliver. Individuals must also have working knowledge of services and support systems that are appropriate for the client being served. The Management Services Contractor will review documented relevant work experience and conduct reference checks to the extent that they become satisfied with relevance of experience.